

June 22, 2018

Los Angeles County Board of Supervisors

Dear community clinic partners, health advocacy community, and friends of MHLA,

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Mark Ridley-Thomas Second District

> Sheila Kuehl Third District

Janice Hahn Fourth District

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To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.

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As someone who we know cares deeply about the individuals, families, and communities who rely on MHLA for primary care, we are writing to you regarding proposed changes to the program. It has come to our attention that there has been misinformation disseminated about funding cuts and enrollment caps to MHLA. This information is not true and has led to unnecessary anxiety about the future of the program. This letter is intended to clarify the status of discussions with MHLA participating community clinics and to assure the community at large that there are no funding cuts or enrollment caps being proposed by the Department of Health Services (DHS).

As you know, MHLA began in October 2014 as a safety net program intended to support primary care to individuals not able to receive coverage through the Affordable Care Act and who wished to receive such care through Los Angeles County's network of community clinics. MHLA is a supplement to both the services provided in DHS' directly operated facilities, all of which also serve the residually uninsured, as well as those provided by the community clinic network for which there are a combination of county, state and federal funding streams. The MHLA program is supported and funded by the Los Angeles County Board of Supervisors and DHS, and follows a decades-long history of similar programs intended to reinforce a health care safety net for vulnerable, low-income, and uninsured residents of the County. We are grateful for our longstanding partnership with the clinics and their advocacy group, the Community Clinic Association of Los Angeles County (CCALAC).

The MHLA program was originally funded to cover 146,000 individuals, and we are proud that the popularity of the program has led to enrollment numbers that consistently surpass this goal. The clinics have done an excellent job enrolling and renewing patients, just as the advocacy community has done an equally tremendous job linking eligible people to the program. We are supportive of enrollment growth and want the program to be available to any person that needs it. For this reason, we do not support a cap on program enrollment. We encourage patients who need the program to continue to enroll, just as we encourage clinics and advocates to connect low-income, uninsured Los Angeles residents to the program.

However, the goal of the MHLA program is not enrollment; enrollment is a means to the true goal of facilitating residually uninsured individuals' access to primary care services. To ensure that the program's structure and funding is aligned toward this principle goal, DHS and the community clinics are engaged in fruitful and transparent discussions about how to ensure that program funds are dedicated and used for patients that actually need and use health care services, rather than using funds for individuals who do not need or seek care. In doing so, we are working to ensure the long-term sustainability of a vibrant and fiscally responsible MHLA program.

Neither the Board of Supervisors nor DHS is proposing to cut funding from MHLA. We are not recommending or advocating for enrollment caps. We are not proposing service caps or cuts. We are not recommending that participants who do not seek care be disenrolled from the program. Rather, we are engaged in candid, positive, and productive discussions with CCALAC and members of the clinic community about how to ensure that funding for the program is used on patients who are enrolled and use services, rather than those that are enrolled and do not use

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services. We believe that these discussions will result in a program that can continue to safeguard access to primary care for uninsured individuals who need and seek care with our community clinic partners, in a manner that maintains proper stewardship of public funds and allows for further program expansion in the future.

Thank you for your support of the MHLA program, and the immigrant communities and families that use it. If you have questions or concerns or would like to discuss these issues, please do not hesitate to contact us.

Sincerely,

Amy Luftig Viste Program Director, My Health LA

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